

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	M 6308 EMY/OAPT (646-42)
	First Named Inventor	C. Ron Wilson
	COMPLETE IF KNOWN	
	Application Number	09 / 302,620
	Filing Date	04/30/99
	Group Art Unit	
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CYTOCHROME P450 MONOOXYGENASE AND NADPH CYTOCHROME P450
OXIDOREDUCTASE GENES AND PROTEINS RELATED TO THE OMEGA....**

the specification of which *(Title of the invention)*

☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **04/30/1999** as United States Application Number or PCT International

Application Number **09/302,620** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/083,798	5/1/98
60/103,099	10/5/98
60/123,555	3/10/99

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Ernest G. Szoke	22,135	John E. Drach	32,891
Wayne C. Jaeschke	21,062	Glenn E. J. Murphy	33,538
Real J. Grandmaison	25,981	Steven D. Harper	33,243
Norvell E. Wisdom, Jr.	30,510		

☒ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	John E. Drach				
Address	HENKEL CORPORATION, PATENT DEPARTMENT				
Address	2500 Renaissance Boulevard, Suite 200				
City	Gulph Mills	State	PA	ZIP	19406
Country	U.S.A.	Telephone	610-278-4925	Fax	610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
C. Ron	Wilson

Inventor's Signature	<i>C. Ron Wilson</i>				Date	8/17/99	
Residence: City	Loveland	State	OH	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	6327 Belmont Road						
Post Office Address							
City	Loveland	State	OH	ZIP	45140	Country	U.S.A.

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
David L.				Craft			
Inventor's Signature	<i>David L. Craft</i>					Date	8/17/99
Residence: City	Fort Thomas	State	KY	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	26 Rosewood Lane						
Post Office Address							
City	Fort Thomas	State	KY	ZIP	41075	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
L. Dudley				Eirich			
Inventor's Signature						Date	
Residence: City	Cincinnati	State	OH	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	227 W. Stoneridge Drive						
Post Office Address							
City	Cincinnati	State	OH	ZIP	45150	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Mark				Eshoo			
Inventor's Signature						Date	
Residence: City	XXXXXXXX	State	XX	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	2821X XXXXXXXX Avenue, Apt X 5X						
Post Office Address							
City	XXXXXXXX	State	XX	ZIP	XXXXXX	Country	U.S.A.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
David L.				Craft			
Inventor's Signature				Date			
Residence: City	Fort Thomas	State	KY	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	26 Rosewood Lane						
Post Office Address							
City	Fort Thomas	State	KY	ZIP	41075	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
L. Dudley				Eirich			
Inventor's Signature	<i>L. Dudley Eirich</i>			Date	8/17/97		
Residence: City	Cincinnati	State	OH	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	227 W. Stoneridge Drive						
Post Office Address							
City	Cincinnati	State	OH	ZIP	45150	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Mark				Eshoo			
Inventor's Signature				Date			
Residence: City	XXXXXX	State	XX	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	2021X Hilltop Ave X XXXXX XXXXX						
Post Office Address							
City	XXXXXX	State	XX	ZIP	XXXXXX	Country	U.S.A.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

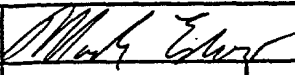
Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
David L.				Craft			
Inventor's Signature						Date	
Residence: City	Fort Thomas	State	KY	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	26 Rosewood Lane						
Post Office Address							
City	Fort Thomas	State	KY	ZIP	41075	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
L. Dudley				Eirich			
Inventor's Signature						Date	
Residence: City	Cincinnati	State	OH	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	227 W. Stoneridge Drive						
Post Office Address							
City	Cincinnati	State	OH	ZIP	45150	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Mark				Eshoo			
Inventor's Signature						Date	11-30-99
Residence: City	Fairfax	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	34 Creek Road						
Post Office Address							
City	Fairfax	State	CA	ZIP	94930	Country	U.S.A.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → +

PTO:SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<h2 style="margin: 0;">DECLARATION</h2>	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>3</u>
---	--

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Krishna M.				Madduri			
Inventor's Signature	<i>K. Madduri</i>				Date	11-23-99	
Residence: City	Westfield	State	IN	Country	U.S.A.	Citizenship	India
Post Office Address 14159 Nicholas Drive							
Post Office Address							
City	Westfield	State	IN	ZIP	46074	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Cathy A.				Cornett			
Inventor's Signature					Date		
Residence: City	Crescent Springs	State	KY	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 697 Meadow Wood Drive, Apt. #11							
Post Office Address							
City	Crescent Springs	State	KY	ZIP	41017	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Alfred A.				Brenner			
Inventor's Signature					Date		
Residence: City	Santa Rosa	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address 1055 West College #127							
Post Office Address							
City	Santa Rosa	State	CA	ZIP	95401	Country	U.S.A.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO:SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 2 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Krishna M.				Madduri			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Indianapolis		IN		U.S.A.		India	
Post Office Address							
8237 Xxxxxx Xxxxxx Xxxxxx							
Post Office Address							
City		State		ZIP		Country	
Indianapolis		IN		46268		U.S.A.	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Cathy A.				Cornett			
Inventor's Signature		<i>Cathy A Cornett</i>				Date	
Residence: City		State		Country		Citizenship	
Crescent Springs		KY		U.S.A.		U.S.A.	
Post Office Address							
697 Meadow Wood Drive, Apt. #11							
Post Office Address							
City		State		ZIP		Country	
Crescent Springs		KY		41017		U.S.A.	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Alfred A.				Brenner			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Saxxx Xxxxx		CA		U.S.A.		U.S.A.	
Post Office Address							
Xxxx Xxxxxx Xxxxxx							
Post Office Address							
City		State		ZIP		Country	
Saxxx Xxxxx		CA		93403		U.S.A.	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → +

PTO:SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>3</u>
--------------------	--

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Krishna M.				Madduri			
Inventor's Signature						Date	
Residence: City	Westfield	State	IN	Country	U.S.A.	Citizenship	India
Post Office Address	14159 Nicholas Drive						
Post Office Address							
City	Westfield	State	IN	ZIP	46074	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Cathy A.				Cornett			
Inventor's Signature						Date	
Residence: City	Crescent Springs	State	KY	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	697 Meadow Wood Drive, Apt. #11						
Post Office Address							
City	Crescent Springs	State	KY	ZIP	41017	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Alfred A.				Brenner			
Inventor's Signature	<i>Alfred A Brenner</i>					Date	12/17/99
Residence: City	Santa Rosa	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	1055 West College #127						
Post Office Address							
City	Santa Rosa	State	CA	ZIP	95401	Country	U.S.A.

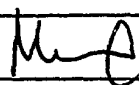
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.**

Please type a plus sign (+) inside this box → **+**

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
--------------------	--


Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Maria				Tang			
Inventor's Signature				8/16/99			
Residence: City	Fairfield	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	2043 Cliffwood Drive						
Post Office Address							
City	Fairfield	State	CA	ZIP	94533	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
John C.				Loper			
Inventor's Signature				Date			
Residence: City	Cincinnati	State	OH	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	6315 Parkman Place						
Post Office Address							
City	Cincinnati	State	OH	ZIP	45213	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Martin				Gleeson			
Inventor's Signature				Date			
Residence: City	San Diego	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	4228 Cordobes Cove						
Post Office Address							
City	San Diego	State	CA	ZIP	92130	Country	U.S.A.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → +

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
--------------------	---

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Maria				Tang			
Inventor's Signature						Date	
Residence: City		Fairfield	State	CA	Country	U.S.A.	Citizenship U.S.A.
Post Office Address		2043 Cliffwood Drive					
Post Office Address							
City		Fairfield	State	CA	ZIP	94533	Country U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
John C.				Loper			
Inventor's Signature						Date 08/08/99	
Residence: City		Cincinnati	State	OH	Country	U.S.A.	Citizenship U.S.A.
Post Office Address		6315 Parkman Place					
Post Office Address							
City		Cincinnati	State	OH	ZIP	45213	Country U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Martin				Gleeson			
Inventor's Signature						Date	
Residence: City		San Diego	State	CA	Country	U.S.A.	Citizenship U.S.A.
Post Office Address		4228 Cordobes Cove					
Post Office Address							
City		San Diego	State	CA	ZIP	92130	Country U.S.A.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.**

Please type a plus sign (+) inside this box → +

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Maria				Tang			
Inventor's Signature						Date	
Residence: City	Fairfield	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	2043 Cliffwood Drive						
Post Office Address							
City	Fairfield	State	CA	ZIP	94533	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
John C.				Loper			
Inventor's Signature						Date	
Residence: City	Cincinnati	State	OH	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	6315 Parkman Place						
Post Office Address							
City	Cincinnati	State	OH	ZIP	45213	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Martin				Gleeson			
Inventor's Signature	<i>Martin Gleeson</i>					Date	9/AUG/97
Residence: City	San Diego	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	4228 Cordobes Cove						
Post Office Address							
City	San Diego	State	CA	ZIP	92130	Country	U.S.A.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/02C (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

+

DECLARATION

REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
Peter G. Dilworth	26,450	Russell R. Kassner	36,183
Rocco S. Barrese	25,253	Christopher G. Trainor	39,517
David M. Carter	30,949	George Likourezos	40,067
Paul J. Farrell	33,494	James M. Loeffler	37,873
Peter DeLuca	32,978	Edward C. Meagher	41,189
Jeffrey S. Steen	32,063	Susan L. Hess	37,350
Adrian T. Calderone	31,746	Michael P. Dilworth	37,311
George M. Kaplan	28,375	Glenn D. Smith	42,156
Joseph W. Schmidt	36,920		
Raymond E. Farrell	34,816		

HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO:
COMMISSIONER OF PATENTS AND TRADEMARKS,
WASHINGTON, D.C. 20231, ON 2-3-00
(DATE OF DEPOSIT)

Rose A. Stowe Rose A. Stowe
(SIGNATURE)

February 3, 2000
(DATE OF SIGNATURE)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

+